Appendix A-10: Newborn (NEWB-1) Measure Rate Calculation Rules

NEWB-1 Measure Rules Effective as of Q3-2017 discharges

<u>General Rule</u>: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

- X Case will be rejected, not in measure population
- B Case will be excluded, not in measure population
- D In measure population, excluded from numerator
- E In measure population, included in numerator

a Element Sequence # / Name	Rule	
Episode of Care	continue if value = NEWB-1, otherwise assign to Category X	
2 Provider Name assign to Category X if field is empty (i.e., no characters)		
Provider ID	check against Provider ID table, assign to Category X if missing or no match	
First Name	assign to Category X if field is empty (i.e., no characters)	
Last Name	assign to Category X if field is empty (i.e., no characters)	
Birthdate	assign to Category X if field is empty (i.e., no date)	
Sex	assign to Category X if field is empty (i.e., no characters)	
Postal Code	assign to Category X if field is empty (i.e., no postal code) or invalid	
Race	check against Race Code table, assign to Category X if missing or no match	
Ethnicity	check against Ethnicity Code table, assign to Category X if missing or no match	
Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X	
Hospital Bill Number	assign to Category X if field is empty (i.e., no characters)	
Patient ID	assign to Category X if field is empty (i.e., no characters)	
14 Admission Date date cannot be after Discharge Date, if so, assign to Category X		
	assign to Category X if field is empty or invalid (i.e., no date)	
Discharge Date	continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date	
	assign to Category X if field is empty or invalid (i.e., no date)	
Payer Source	continue if valid value, otherwise assign to Category X	
	assign to Category X if field is empty or invalid (i.e., no characters)	
Sample	continue if value = Y or N, otherwise assign to Category X	
Discharge Disposition	if value = 4, 5, 6, assign to Category B/ assign to Category X if missing or no match	
Term Newborn	if value = N, assign to Category B/ assign missing value to Category X	
21 Admission to NICU if value = Y, assign to Category B/ assign missing value to Category X		
Exclusive Breast Milk Feeding	if value = N, assign to Category D / assign missing value to Category X	
	if value = Y, assign to Category E	
	Provider Name Provider ID First Name Last Name Birthdate Sex Postal Code Race Ethnicity Hispanic Indicator Hospital Bill Number Patient ID Admission Date Discharge Date Payer Source MassHealth Member ID Sample Discharge Disposition Term Newborn	

MEASURE RATE =

Appendix A-10: Newborn (NEWB-2) Measure Rate Calculation Rules

NEWB-2 Measure Rules Effective	e as of Q3-2017 discharges	Categories
		X - Case will be rejected, not in
General Rule: Proceed seguentially as	directed using data elements submitted. Each	measure population
case must be assigned to a specific cat	tegory (X, B, D, or E) and once assigned, review	B - Case will be excluded, not in
		measure population
Data Element Sequence # / Name	Rule	D - In measure population, excluded from numerator
·		E - In measure population,
1 Episode of Care	continue if value = NEWB-2, otherwise assign to Category X	included in numerator
2 Provider Name	assign to Category X if field is empty (i.e., no characters)	
3 Provider ID	check against Provider ID table, assign to Category X if missing or no matcl	h
4 First Name	assign to Category X if field is empty (i.e., no characters)	
5 Last Name	assign to Category X if field is empty (i.e., no characters)	
6 Birthdate	assign to Category X if field is empty (i.e., no date)	
7 Sex	assign to Category X if field is empty (i.e., no characters)	
8 Postal Code	assign to Category X if field is empty (i.e., no postal code) or invalid	
9 Race	check against Race Code table, assign to Category X if missing or no match	h
10 Ethnicity	check against Ethnicity Code table, assign to Category X if missing or no m	atch
11 Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X	
12 Hospital Bill Number	assign to Category X if field is empty (i.e., no characters)	
13 Patient ID	assign to Category X if field is empty (i.e., no characters)	
14 Admission Date	date cannot be after Discharge Date, if so, assign to Category X	
	assign to Category X if field is empty or invalid (i.e., no date)	
15 Discharge Date	continue if date is within submission time frame, otherwise assign to Categor	ory X /cannot be prior to admit date
·	assign to Category X if field is empty or invalid (i.e., no date)	
16 Payer Source	continue if valid value, otherwise assign to Category X	
17 MassHealth Member ID	assign to Category X if field is empty or invalid(i.e., no characters)	
18 Sample	continue if value = Y or N, otherwise assign to Category X	
19 Discharge Disposition	if value = 4, 5, 6, assign to Category B/ assign to Category X if missing or r	no match
20 Gestational Age	if value = < 35 or UTD, assign to Category B / assign missing value to Cate	
21 Born in this Facility	if value = N, assign to Category B/ assign missing value to Category X	×
22 Admission to NICU	if value = Y, assign to Category B/ assign missing value to Category X	
23 Comfort Measures Only	if value = Y, assign to Category B/ assign missing value to Category X	
24 Newborn Bilirubin Screening	if value = 2, assign to Category B/ assign missing value to Category X	
	if value = 3, assign to Category D/ if value = 1, assign to Category E	

MEASURE RATE =

Appendix 10: Maternity (MAT-4) Measure Rate Calculation Rules

MAT-4 Measure Rules Effective as of Q3- 2017 discharges

General Rule: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review ends.

Categories

- X Case will be rejected, not in measure population
- B Case will be excluded, not in measure population

Dat	a Element Sequence # / Name	Rule
1	Episode of Care	continue if value = MAT-4, otherwise assign to Category X
2	Provider Name	assign to Category X if field is empty (i.e., no characters)
3	Provider ID	check against Provider ID table, assign to Category X if missing or no match
4	First Name	assign to Category X if field is empty (i.e., no characters)
5	Last Name	assign to Category X if field is empty (i.e., no characters)
6	Birthdate	assign to Category X if field is empty (i.e., no date)
7	Sex	continue if value = F, otherwise assign to Category X
8	Postal Code	assign to Category X if field is empty (i.e., no postal code) or invalid
9	Race	check against Race Code table, assign to Category X if missing or no match
10	Ethnicity	check against Ethnicity Code table, assign to Category X if missing or no match
	Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X
12	Hospital Bill Number	assign to Category X if field is empty (i.e., no characters)
13	Patient ID	assign to Category X if field is empty (i.e., no characters)
14	Admission Date	date cannot be after Discharge Date, if so, assign to Category X
		assign to Category X if field is empty or invalid (i.e., no date)
15	Discharge Date	continue if date is within submission time frame, otherwise assign to Category X/ cannot be prior to admit date
		assign to Category X if field is empty or invalid (i.e., no date)
17	Discharge Disposition	check against Discharge Disposition Code table, assign to Category X if missing or no match
18	Payer Source	continue if valid value, otherwise assign to Category X
19	MassHealth Member ID	assign to Category X if field is empty or invalid (i.e., no characters)
	Sample	continue if value = Y or N, otherwise assign to Category X
21	ICD-10-CM Principal or Other Diagnosis Code	if value = on table 11.09, assign to Category B / assign missing value to Category X
22	ICD-10-CM Principal or Other Diagnosis Code	if value = none on table 11.08, assign to Category B
	Gestational Age	if value = < 37 or UTD, assign to Category B / assign missing value to Category X
24	Number of Previous Live Births	if value = > 0, assign to Category B / assign missing value to Category X
		if value = UTD, assign to Category E
25	ICD-10-PCS Principal or Other Procedure Code	if value = none on table 11.06, assign to Category D
		if value = on table 11.06, assign to Category E

MEASURE RATE =

Appendix A-10: Maternity (MAT-5) Measure Rate Calculation Rules

MAT-5 Measure Rules Effective as	of Q3- 2017 discharges	Categories X - Case will be rejected, not in	
General Rule: Proceed sequentially as dimust be assigned to a specific category (X	rected using data elements submitted. Each case (, B, D, or E) and once assigned, review ends.	measure population B - Case will be excluded, not in measure population	
Data Element Sequence # / Name	Rule	D - In measure population, excluded from numerator E - In measure population,	
1 Episode of Care	continue if value = MAT-5, otherwise assign to Category X	included in numerator	
2 Provider Name	assign to Category X if field is empty (i.e., no characters)		
3 Provider ID			
4 First Name	assign to Category X if field is empty (i.e., no characters)		
5 Last Name	assign to Category X if field is empty (i.e., no characters)		
6 Birthdate	assign to Category X if field is empty (i.e., no date)		
7 Sex	continue if value = F, otherwise assign to Category X		
8 Postal Code	assign to Category X if field is empty (i.e., no postal code) or invalid		
9 Race	check against Race Code table, assign to Category X if missing or no match		
10 Ethnicity	check against Ethnicity Code table, assign to Category X if missing or no match		
11 Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X		
12 Hospital Bill Number	assign to Category X if field is empty (i.e., no characters)		
13 Patient ID	assign to Category X if field is empty (i.e., no characters)		
14 Admission Date	date cannot be after Discharge Date, if so, assign to Cateo	<u> </u>	
	assign to Category X if field is empty or invalid (i.e., no dat		
15 Discharge Date	continue if date is within submission time frame, otherwise		
	assign to Category X if field is empty or invalid (i.e., no dat	e)	
16 Payer Source	continue if valid value, otherwise assign to Category X		
17 MassHealth Member ID	assign to Category X if field is empty or invalid (i.e., no characters)		
18 Sample	continue if value = Y or N, otherwise assign to Category X		
19 Discharge Disposition	Discharge Disposition check against Discharge Disposition Code table, assign to Category X if missing or no match		
20 DVT Prophylaxis	if value = N, assign to Category D / assign missing value to	o Category X	
	if value = Y, assign to Category E		

MEASURE RATE =

Appendix A-10 Care Coordination (CCM-1) Measure Rate Calculation Rules

CCM-1 Measure Rules Effective as of Q3-2017 discharges

General Rule: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once

Categories

- X Case will be rejected, not in measure population
- B Case will be excluded, not in measure population
- D In measure population, excluded from numerator
- E In measure population, included in numerator

Data Element Sequence # / Name Rule

1	Episode of Care	continue if value = CCM, otherwise assign to Category X	
2	Provider Name	assign to Category X if field is empty (i.e., no characters)	
3	Provider ID	check against Provider ID table, assign to Category X if missing or no match	
4	First Name	assign to Category X if field is empty (i.e., no characters)	
5	Last Name	assign to Category X if field is empty (i.e., no characters)	
6	Birthdate	assign to Category X if field is empty (i.e., no date)	
7	Sex	assign to Category X if field is empty (i.e., no characters)	
8	Postal Code	assign to Category X if field is empty (i.e., no postal code) or invalid	
9	Race	check against Race Code table, assign to Category X if missing or no match	
10	Ethnicity	check against Ethnicity Code table, assign to Category X if missing or no match	
11	Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X	
12	Hospital Bill Number	assign to Category X if field is empty (i.e., no characters)	
13	Patient ID	assign to Category X if field is empty (i.e., no characters)	
14	Admission Date	date cannot be after Discharge Date, if so, assign to Category X	
		assign to Category X if field is empty or invalid (i.e., no date)	
15	Discharge Date	continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date	
		assign to Category X if field is empty or invalid (i.e., no date)	
16	Discharge Disposition	if value = 6, 7, assign to Category B/ assign to Category X if missing or no match	
17	Payer Source	continue if valid value, otherwise assign to Category X	
18	MassHealth Member ID	assign to Category X if field is empty or invalid(i.e., no characters)	
19	Sample	continue if value = Y or N, otherwise assign to Category X	
20	Reconciled Medication List	if value = N, assign to Category D / assign missing value to Category X	
		if value = Y, assign to Category E	

MEASURE RATE =

Appendix A-10 Care Coordination (CCM-2) Measure Rate Calculation Rules

CCM-2 Measure Rules Effective as of Q3-2017 discharges

<u>General Rule</u>: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review

Categories

- X Case will be rejected, not in measure population
- B Case will be excluded, not in measure population
- D In measure population, excluded from numerator
- E In measure population, included in numerator

Dat	a Element Sequence # / Name	Rule
1	Episode of Care	continue if value = CCM, otherwise assign to Category X
2	Provider Name	assign to Category X if field is empty (i.e., no characters)
3	Provider ID	check against Provider ID table, assign to Category X if missing or no match
4	First Name	assign to Category X if field is empty (i.e., no characters)
5	Last Name	assign to Category X if field is empty (i.e., no characters)
6	Birthdate	assign to Category X if field is empty (i.e., no date)
7	Sex	assign to Category X if field is empty (i.e., no characters)
8	Postal Code	assign to Category X if field is empty (i.e., no postal code) or invalid
9	Race	check against Race Code table, assign to Category X if missing or no match
10	Ethnicity	check against Ethnicity Code table, assign to Category X if missing or no match
11	Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X
12	Hospital Bill Number	assign to Category X if field is empty (i.e., no characters)
13	Patient ID	assign to Category X if field is empty (i.e., no characters)
14	Admission Date	date cannot be after Discharge Date, if so, assign to Category X
		assign to Category X if field is empty or invalid (i.e., no date)
15	Discharge Date	continue if date is within submission time frame, otherwise assign to Category X /cannot be prior to admit date
		assign to Category X if field is empty or invalid (i.e., no date)
16	Discharge Disposition	if value = 6, 7, assign to Category B/ assign to Category X if missing or no match
17	Payer Source	continue if valid value, otherwise assign to Category X
18	MassHealth Member ID	assign to Category X if field is empty or invalid (i.e., no characters)
19	Sample	continue if value = Y or N, otherwise assign to Category X

Appendix A-10 Care Coordination (CCM-2) Measure Rate Calculation Rules

CCM-2 Measure Rules Effective a	s of Q3- 2016 discharges
Data Element Sequence # / Name	Rule
20 Transition Record	if value = N, assign to Category D / assign missing value to Category X
21 Reason for Inpatient Admission	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
22 Medical Procedures & Tests	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
23 Discharge Diagnosis	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
24 Current Medication List	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
25 Studies Pending at Discharge	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
26 Patient Instructions	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
27 Advance Care Plan	if patient < 18, go to data element Contact Information 24/7 (Sequence #29)
	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
28 Contact Information 24 hrs/ 7 days	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
29 Contact Information Studies Pending	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
30 Plan for Follow-Up Care	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
Primary Physician/ Health Care	
Professional Designated for Follow-Up	
31 Care	assign missing value to Category X, if value = Y, add 1 to Transition Record Counter
32 calculated value	if patient <18 and transition record counter < 10, assign to Category D
	if patient <18 and transition record counter = 10, assign to Category E
	if patient >= 18 and transition record counter < 11, assign to Category D
	if patient >= 18 and transition record counter = 11, assign to Category E

MEASURE RATE =

Appendix A-10 Care Coordination (CCM-3) Measure Rate Calculation Rules

CCM-3 Measure Rules Effective as of Q3- 2017 discharges

General Rule: Proceed sequentially as directed using data elements submitted. Each case must be assigned to a specific category (X, B, D, or E) and once assigned, review

- <u>C</u>ategories X Case will be rejected, not in measure population
- B Case will be excluded, not in measure population
- D In measure population, excluded from numerator
- E In measure population.

Dat	a Element Sequence # / Name	Rule	E - III Theasure population,
1	Episode of Care	continue if value = CCM, otherwise assign to Category X	
2	Provider Name	assign to Category X if field is empty (i.e., no characters)	
Provider ID		sing or no match	
4	First Name	assign to Category X if field is empty (i.e., no characters)	
5	Last Name	assign to Category X if field is empty (i.e., no characters)	
6	Birthdate	assign to Category X if field is empty (i.e., no date)	
7	Sex	assign to Category X if field is empty (i.e., no characters)	
8	Postal Code	assign to Category X if field is empty (i.e., no postal code) or	r invalid
9 Race check against Race Code table, assign to Category X if missing or no match			
10	Ethnicity	check against Ethnicity Code table, assign to Category X if r	nissing or no match
	Hispanic Indicator	continue if value = Y or N, otherwise assign to Category X	
12 Hospital Bill Number assign to Category X if field is empty (i.e., no characters) 13 Patient ID assign to Category X if field is empty (i.e., no characters)		assign to Category X if field is empty (i.e., no characters)	
14	Admission Date	date cannot be after Discharge Date, if so, assign to Category X assign to Category X if field is empty or invalid (i.e., no date) continue if date is within submission time frame, otherwise assign to Category X / cannot be prior to admit date	
15	Discharge Date		
		assign to Category X if field is empty or invalid (i.e., no date)	
	Discharge Disposition	if value = 6, 7, assign to Category B/ assign to Category X i	f missing or no match
17 Payer Source continue if valid value, otherwise assign to Category X			
18	MassHealth Member ID	assign to Category X if field is empty or invalid (i.e., no char	acters)
19 Sample continue if value = Y or N, otherwise assign to Category X			
20	Transmission Date	if value = UTD, assign to Category D / assign missing or inv	
21	calculated value	if (Transmission Date - Discharge Date) > 2 days, assign to	o Category D
if (Transmission Date - Discharge Date) < 0 days, assign to Category D if (Transmission Date - Discharge Date) >= 0 and <= 2 days, assign to Category E		Category D	
		s, assign to Category E	

MEASURE RATE =

Number of cases in Category E

Number of cases in Category D + Number of cases in Category E